

GARLIC REVISITED: THERAPEUTIC FOR THE MAJOR DISEASES OF OUR TIMES?

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Garlic may play an invaluable role in the prevention and therapy of the major causes of death. Anecdotal, basic, and clinical research data are confirming the efficacy of this herb in the treatment of hyperlipemia, cancer, heavy-metal intoxication, infectious diseases, hypertension, free-radical damage, and immune deficiency states. Garlic's broad antimicrobial spectra and its ability to modulate immunity may play a strategic role in the acquired immunodeficiency syndrome pandemic. A review of the literature supports a greater scrutiny of this herb's therapeutic potential.

Tremendous anecdotal evidence supports the invaluable role that garlic has played in the therapy of many diseases since time immemorial.^{1,2} Increasingly, this role is being confirmed by basic and clinical research reports from around the world.³⁻⁹ Garlic is the best example of the philosophy that your medicine should be your food, and your food should be your medicine. Some diseases that have been treated suc-

cessfully with garlic include thromboembolic disorders, hypertension, hyperlipemia, heavy-metal toxicity, and various infections—some of the major killers of our times.

Garlic has been a mainstay in the medicinal arsenal of many past civilizations, including the Egyptian, Hebrew, Chinese, Greek, Indian, Japanese, and Roman.^{1,2,9,10} French priests consumed liberal quantities of garlic during the bubonic plague and had a much higher survival rate than their English counterparts. During the World Wars, Britain, Germany, and Russia used garlic for treating battlefield infections with much success.^{1,11-13} Because of preliminary data that strongly support it as an immune enhancer, and because of its effectiveness against a number of opportunistic microbes that are associated with acquired immunodeficiency syndrome (AIDS), including Herpesvirus hominis type I,⁸ cryptococcal,^{14,15} mycobacterial,^{16,17} and candidal¹⁸ organisms, garlic may have a strategic role to play in the AIDS pandemic. No other substance, either natural or synthetic, can match garlic's proven therapeutic versatility and effectiveness.

The pharmacologic effect of garlic is based on its activity as a hypoglycemic and hypolipemic agent,¹⁹⁻³⁹ anticoagulant,⁴⁰⁻⁵⁴ antihypertensive,^{55,56} antimicrobial,⁵⁷⁻⁶⁹ detoxifier of heavy metals,¹ and an immune-system modulator.⁷⁰ Further basic and clinical studies need to be directed toward the pharmacology of garlic and how it relates to the quality of various preparations. This is necessary for determining the routes of administration, dosages, amounts, and efficacy of this herb.

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TABLE 1. CONTENTS OF AMINO ACIDS AND RELATIVE VALUE OF GARLIC

Amino Acids	Content (mg/mL)	Relative Value (%)
Lysine*	0.95	4.4
Histidine	0.32	1.5
Arginine	6.55	30.3
Aspartic acid	2.10	9.7
Threonine*	0.58	2.7
Serine	0.63	2.9
Glutamine	4.50	20.8
Proline	0.80	3.7
Glycine	0.69	3.2
Alanine	0.70	3.2
Cysteine	0.36	1.7
Valine*	0.82	3.8
Methionine*	0.12	0.6
Isoleucine*	0.43	2.0
Leucine*	0.81	3.7
Tryptophan*	0.60	2.8
Phenylalanine*	0.66	3.0
Total	21.62	100

* Essential amino acids

Evidence to date indicates that raw or cold-aged, whole-clove garlic offers the greatest medicinal value. Much of the therapeutic composition of garlic is lost when preparing it with heat. Cold-aged, whole-clove garlic preparations are odorless, predigested, and retain the same balance, quality, and quantity of medicinal factors as the raw. The highest quality garlic is grown organically in germanium- and selenium-rich unpolluted soil.

Revisiting garlic means exploring a new frontier of vast therapeutic potential. This potential has application for curing and preventing the major scourges of our times.

DISCUSSION

The chemistry of garlic, *Allium sativum*, establishes it as a member of the lily family. Block et al⁴ have elucidated some of the chemical compounds in garlic and have made correlations with their pharmacologic activity.

Garlic contains 33 sulfur compounds, 17 amino acids (including all of the essential ones), germanium, calcium, copper, iron, potassium, magnesium, selenium, zinc, and vitamins A, B₁, and C.⁹ Future studies may reveal other therapeutic components (Tables 1 and 2).

TABLE 2. THE MEDICINAL SPECTRA OF GARLIC

Pharmacologic Activity	Probable Components Contributing to Activity
Anticoagulation	Ajoene
Antihypertensive	Selenium, germanium
Antimicrobial	
Antiparasitic	Allicin-alliin
Antibiotic	Allicin-alliin
Antimycotic	Allicin-alliin, ajoene
Antiviral	Allicin-ajoene
Hypolipemic	Diallyl disulfide
Detoxification of heavy metals	Selenium, allyl mercaptan, germanium
Antitumor	Selenium, germanium
Vitamins	Thiamine, vitamins A and C
Antioxidant	Selenium, germanium
Antiaging	Selenium, diallyl disulfide
Immune modulation	
Natural killer-cell activity and other kinds of cell-mediated immunity	Germanium, selenium, zinc*
Humoral immunity	Germanium, allicin
Complement activity	Magnesium, calcium

* Zinc is essential for the synthesis of the thymus gland hormone, thymosin.

MEDICINAL EFFECTS

Hypolipemic Activity

Human and animal studies have substantiated that garlic lowers serum cholesterol and triglycerides and increases the amount of high-density lipoproteins (HDL).¹⁹⁻³⁹ Dietary-induced atherosclerosis was significantly reversed in rabbits when fed garlic consistently for a few weeks. The hypolipemic activity of garlic may be partially responsible for the enhanced natural killer-cell activity noted in preliminary studies. The incidence of major diseases associated with hyperlipemia, such as cancer, diabetes mellitus, and thromboembolic disorders, could be reduced with regular consumption of garlic. Hyperlipemia is the underlying pathophysiology of the number one killer, atherosclerotic coronary artery heart disease.

Anticoagulation

This effect complements the hypolipemic activity of garlic and further solidifies a role for this herb in the prevention and therapy of atherosclerotic coronary artery heart disease.⁷¹⁻⁷⁸ Platelet aggregation su-

perimposed on an atherosclerotic vessel is a major antecedent event causing myocardial injury, infarction, and thromboembolic diseases. Studies have shown that garlic has great potential in inhibiting platelet aggregation and enhancing fibrinolytic activity.

Antihypertension

Anecdotally, Afro-Americans in the rural South have used garlic to prevent and treat hypertension since the days of slavery. Garlic may have the capacity to be used alone or to supplement allopathic medicines used in current therapy that have side effects, such as impotence and tolerance. Studies suggest that garlic may exert its ability to lower blood pressure by acting like prostaglandin E_1 , which decreases peripheral vascular resistance.⁷⁹

Nutritional Supplement

The nutritional composition of garlic includes magnesium, iron, copper, zinc, selenium, calcium, potassium chloride, germanium, sulfur compounds, amino acids, vitamins A, B₁, and C. Thiamine (B₁) is well known for its role in the therapy of malnutrition. The adverse effect of malnutrition on the immune system has been established. Garlic increases the body's capacity to assimilate thiamine by enhancing its absorption. Thiamine is a key part of the cocarboxylase enzyme that acts beneficially on liver cells, and this may help to explain claims that garlic is prophylactic for liver and gallbladder damage.⁹ Garlic protects hepatocytes in tissue culture from the damage of carbon tetrachloride.⁷ Along with selenium, vitamin C and zinc contribute to the antioxidant capacity of garlic. Garlic is one of the richest sources of organic germanium and selenium, and studies have shown great potential in germanium for enhancing the immune system. This mechanism could help explain how garlic has enhanced natural killer-cell activity.⁸⁰⁻⁸² The functional role that the amino acids, especially the essential ones, play in maintaining our physiologic well-being are numerous (Table 1). However, garlic consumption does have side effects, including dermatitis,⁸³⁻⁸⁵ most often caused by an allergic response to the high sulfur content, and colitis, caused by an overkill of normal flora in the gut. This is usually caused by overconsumption of raw garlic.

Detoxification

Garlic has been shown to be effective in the treatment of lead, mercury, cadmium, and arsenic poisoning. Some sulfur compounds bind heavy metals and other exogenous toxins such as food additives⁸⁶; these additives include undesirable dyes, preservatives, and sweeteners. This binding facilitates excretion. Garlic is the richest source of organically bound selenium, which has been shown to provide some protection against heavy-metal toxicity.

Antioxidant Activity

The free-radical scavenger action of garlic can probably be explained by its germanium, glutathione, selenium, and zinc content. The latter three are key components of the antioxidant enzymes, superoxide dismutase and glutathione peroxidase. Free-radical pathology has been incriminated in an array of degenerative disorders, which include aging, arthritis, and cancer. One mechanism of aging is thought to be secondary to the lipid microviscosity of cell membranes.⁸⁷ Garlic may have great potential for retarding aging because it inhibits lipogenesis. Garlic may play an adjunctive role in oncology therapy by neutralizing the free-radical damage to normal tissues caused by radiation and chemotherapy.⁸⁸ In addition to its role as an antioxidant, germanium activates or substitutes for oxygen, which may be the most powerful stimulant of the immune system.

Immune System Modulation

Garlic may be a potent, nonspecific biologic response modifier. This was dramatically shown in mice implanted with transitional-cell carcinoma that were treated by intralesional and systemic administration of garlic.⁶ The reduction and destruction of tumor mass were proportional to the dosage and length of administration. Microscopically, garlic enhanced macrophage activity and cytotoxic T-cell necrosis in these tumors regardless of intralesional or systemic administration. The phagocytic activity of peritoneal macrophages has been enhanced in rats when garlic was administered.⁸⁹

Preliminary studies have shown that humans fed garlic and cold-aged, whole-clove preparations daily for three weeks had natural killer (NK) cells that destroyed 140 to 160 percent more K562 lymphoma cells than controls in vitro. These findings suggest

that garlic may have an effect on other components of cell-mediated immunity, including macrophages and T cells. Increased NK-cell activity may represent increased lymphokine production.⁹⁰ Interleukin II and the gamma interferons are two lymphokines that increase NK-cell activity. Garlic may enhance the production of other lymphokines, such as the tumor necrosis factor, which may account for the impressive destruction of tumors in laboratory animals.⁶ Enhanced NK-cell activity may also be secondary to garlic affecting the synthesis and release of natural killer cytotoxic factors (NKCF), including cytolyisin.⁹¹ These factors are released by NK cells to destroy cancer and virus-infected cells. The NKCF content of the NK cells in AIDS patients is markedly reduced and NKCF production is inhibited.⁹¹ Studies of garlic and immunity should yield invaluable basic research and clinical data to help us better understand how this herb may aid in the prophylaxis of invasion by microbes and subversion by cancer. Evidence to date suggests that garlic may become known as one of the grand conductors of the body's immune symphony. The capacity of garlic to modulate immunity is exemplified by some of its contents (Table 2).

Anticancer Potential

The anticancer activity of garlic may be explained by a synergism of the pharmacologic effects mentioned previously. Garlic has had a direct cytotoxic effect on some cancer cells, including two lines of gastric cancer cells.⁹² Incubation of Erlich's ascites carcinoma, sarcoma-180, and Morris hepatoma cells with garlic prevented peritoneal implantation in laboratory animals.⁹³⁻⁹⁵ Repeat implantation of cancer cells that were incubated in garlic prior to injection triggered the humoral immune system and protected laboratory animals from challenges with untreated cancer cells. Garlic may alter the membranes of these tumor cells, making them antigenic with antibody production, while boosting cell-mediated immunity. It may also unmask or alter receptors in the cell wall of tumor cells that are responsible for the escape of cancer from NK cells, cytotoxic T cells, and macrophages. Residents of a region in China who did not eat garlic had 1,000 times more stomach cancer than those in a region who consumed large quantities of garlic regularly.⁸⁹

Selenium and sulfur are two other factors that are probably responsible for some of the cancer-preventing activity of garlic. These elements assist in antiox-

idation, carcinogen excretion, and immune-system modulation. Nitrates and nitrites have been incriminated as causes of gastric cancer.⁸⁶ Garlic offers protection against these carcinogens.⁹⁶ Garlic's role as an immune-system modulator and biologic-response modifier is indicated by the enhancement of NK-cell activity, macrophages, and cytotoxic T-cell activity. This herb may make an enormous contribution to the therapy of cancer and AIDS.⁹⁶ Allicin, a component of garlic, is thought to retard tumor growth by inhibiting sulfhydryl enzymes.^{98,99}

Antimicrobial Spectra

The amazing pharmacologic versatility of garlic is best reflected by its antiviral, antifungal, antiprotozoan, antiparasitic, and antibacterial activity.^{57-68,100-108} Allicin and other sulfur compounds are thought to be the major antimicrobial factors in garlic. Recent studies have shown that ajoene, the factor responsible for anticoagulation in garlic, was superior to allicin in antifungal activity against *Candida albicans* and *Aspergillus niger*.¹⁰⁸

Garlic is effective against a number of gram-negative, gram-positive, and acid-fast bacteria, including *Staphylococcus*, *Salmonella*, *Vibrio*, *Mycobacteria*, and *Proteus* species.¹² Recurrent pyogenic, salmonellal, and mycobacterial infections are seen frequently in AIDS.

Some of the fungi that are susceptible to garlic include *Coccidioides*, *Aspergillus*, *Histoplasma*, *Trichophyton*, *Candida*, and *Cryptococci*. Cryptococcal meningitis has been treated successfully in China with garlic. It is the number one cause of death in the pediatric AIDS patients of Africa. Any effective therapy for AIDS must penetrate the blood-brain barrier to inhibit or destroy the human immunodeficiency virus (HIV) and other associated opportunistic microbes that cause serious central nervous system pathology. The brain is an important reservoir for HIV, and dementia is a significant morbid feature of AIDS. The most common fungal infection of adult AIDS patients in America is candidiasis of the mouth, throat, and esophagus. Candidal organisms are very sensitive to garlic.

Garlic was used by Dr. Albert Schweitzer to treat amoebic dysentery in Africans.¹ Protozoal infections are responsible for much of the morbidity seen in AIDS and AIDS-related complex patients. Offending organisms include *Isospora*, *Cryptosporidia*, *Pneumocystis*, and *Toxoplasma*. Currently, drugs used to

treat these infections are very toxic and may further hamper the immune system. In vivo and in vitro studies must ascertain garlic's effectiveness against these organisms.

Parasitic infections in humans, livestock, and poultry have been treated with garlic. Garlic has been used to treat *Ascaris*, hookworm, and tapeworm infections, and it is used to control some parasites that contaminate vegetables.⁵¹ Further studies are needed to evaluate garlic's antiparasitic activity for human and veterinary applications. Extraintestinal *Strongyloides* is the most common helminthic infection in AIDS patients.

The antiviral activity of garlic has long been intimated by habitual consumers of garlic who rarely have colds or become victims of influenza epidemics. Garlic has been known to abort colds even in those who are not regular consumers. In vivo studies with mice revealed that garlic administration protected mice against intranasal inoculation with influenza viruses and enhanced the production of neutralizing antibodies when given the vaccine.⁶⁸ In vitro studies have shown that garlic has antiviral activity against Herpesvirus hominis type I and the Influenza B virus.⁸ Recently, preliminary studies have revealed a significant enhancement of NK-cell activity in humans administered raw or cold-aged, whole-clove garlic preparations daily for three weeks.⁷⁰ The antiviral activity of garlic in humans may be secondary to a direct toxic effect on viruses and enhanced NK-cell activity that destroys virus-infected cells. Garlic's inhibition of lipogenesis should be evaluated in patients with HIV; altering lipid synthesis could profoundly affect its pathogenicity. A recent study revealed that an aqueous extract of garlic inhibited lipid synthesis in *Candida* species, and this is probably an important mechanism in helping to explain its antifungal activity.¹⁰⁹

CONCLUSIONS

Profound therapeutic and economic implications will evolve as data from studies continue to confirm the medicinal spectra of garlic. Studies in the near future may suggest how much garlic we need to consume to maintain optimal functioning of the immune system as well as preventing and reversing atherosclerosis. Investing in further basic and clinical studies of this versatile medicinal herb should yield great returns.

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Literature Cited

1. Airola P. The Miracle of Garlic. Phoenix: Health Plus Publishers, 1983.
2. Bolton S, Null G, Troetel WM. The medical uses of garlic—Fact and fiction. *Am Pharm* 1982; 22(8):40–43.
3. Arora RC, Arora S, Gupta RD. The long-term use of garlic in ischemic heart disease—An appraisal. *Atherosclerosis* 1981; 40:175–179.
4. Block E. The chemistry of garlic and onions. *Scientific American* 1985; 252(3):114–119.
5. Esanu V, Prahoveanu E. The effect of garlic extract, applied as such or in association with NaF, on experimental influenza in mice. *Virologie* 1983; 34(1):7–11.
6. Lau B, Woolley J, Marsh CL, et al. Superiority of intraleisional immunotherapy with *Corynebacterium parvum* and *Allium sativum* in control of murine transitional cell carcinoma. *J Urol* 1986; 136:701–705.
7. Nakayama S, Yoshisa S, Horao Y, et al. Cytoprotective activity of components of garlic, ginseng, and ciuwjia on hepatocyte injury induced by carbon tetrachloride in vitro. *Hiroshima J Med Sci* 1985; 8:803–809.
8. Tsai Y, Cole LL, Davis LE, et al. Antiviral properties of garlic: In vitro effects on influenza B, herpes simplex I, and cock-sackie viruses. *Planta Medica* 1985; 5:460–461.
9. SGP—The Therapeutic Garlic. Osaka: The Wakunaga Pharmaceutical Company, 1987.
10. Jackson J, Lang A, Schauss AG. An Examination of the Deodorized Garlic Market in North America Relative to Entry of a New Deodorized Garlic Powder. Tacoma, Washington: International Insights, 1987.
11. Spray W. The importance of taking garlic. *Nurs Times* 1978; 74:295.
12. Adetumbi MA, Lau BH. *Allium sativum*—A natural antibiotic. *Med Hypotheses* 1983; 12(3):227–237.
13. Kohman EF. The chemical components of onion vapors responsible for wound healing qualities. *Science* 1947; 106:625.
14. Frontling RA, Bulmer GS. In vitro effect of aqueous extract of garlic on the growth and viability of *Cryptococcus neoformans*. *Mycopathologia* 1978; 70:397–405.
15. Hunan Medical College of China. Garlic in cryptococcal meningitis: A preliminary report of 21 cases. *Chin Med J* 1980; 93:123.
16. Delaha EC, Garagusi VL. Inhibition of mycobacteria by garlic extract (*Allium sativum*). *Antimicrob Agents Chemother* 1985; 27(4):485–486.
17. Rao RR, Rao SS, Natarajan S, Venkataraman PR. Inhibition of *Mycobacterium tuberculosis* by garlic extract. *Nature* 1946; 157:441.
18. Barone FE, Tansey MR. Isolation, purification, identification, synthesis, and kinetics of activity of the anticandidal components of *Allium sativum* and hypothesis for its mode of action. *Mycopathologia* 1977; 69:793.
19. Bordia A. Effect of garlic on blood lipids in patients with coronary heart disease. *Am J Clin Nutr* 1981; 34:2100–2103.
20. Bordia A, Bansal HC. Essential oil of garlic in prevention of atherosclerosis. *Lancet* 1973; 2:1491–1492.
21. Bordia A, Sharma KD, Parma YK, Verma SK. Protective effect of garlic oil on the changes produced by 3 weeks of fatty diet on serum cholesterol serum triglycerides, fibrinolytic activity, and platelet adhesiveness in man. *Indian Heart J* 1982; 34(2): 86–88.
22. Chang MLW, Johnson MA. Effect of garlic on carbohy-

- drate metabolism and lipid synthesis in rats. *J Nutr* 1980; 110: 931-936.
23. Chaudhuri BN, Mukerjee SK, Mongia SS, Charkravarty SK. Hypolipidemic effect of garlic and thyroid function. *Biomed Biochim Acta* 1984; 43(7):1045-1047.
24. Gupta NN, Mehrotra RML, Sircar AR. Effect of onion on serum cholesterol blood coagulation factors and fibrinolytic activity in alimentary lipemia. *Indian J Med Res* 1966; 54:48.
25. Itokawa Y, Inoue R, Sasagawa S, Fujiwara M. Effect of S-Methylcysteine sulfoxide, S-Allylcysteine sulfoxide and related sulfur-containing amino acids on lipid metabolism of experimental hypercholesterolemic rats. *J Nutr* 1973; 103:881.
26. Kamanna VS, Chandrasekhara N. Hypocholesteremic activity of different fractions of garlic. *Indian J Med Res* 1984; 79: 580-583.
27. Kamanna VS, Chandrasekhara N. Effect of garlic on serum lipoproteins and lipoprotein cholesterol levels in albino rats rendered hypercholesteremic by feeding cholesterol. *Lipids* 1982; 17:483-488.
28. Kritchevsky D. Effect of garlic oil on experimental atherosclerosis. *Artery* 1975; 1:319-323.
29. Kritchevsky F, Tepper SA, Morrissey R, Klurfeld D. Influence of garlic oil on cholesterol metabolism in rats. *Nutr Reports Int* 1980; 22:641-645.
30. Nagai K, Osawa S. Cholesterol-lowering effect of aged garlic extract in rats. *Basic Pharmacol Ther* 1974; 2:41-50.
31. Bordia A, Verma SK. Effect of garlic feeding on regression of experimental atherosclerosis in rabbits. *Artery* 1980; 7:428-437.
32. Bordia AK, Verma SK. Garlic on the reversibility of experimental atherosclerosis. *Indian Heart J* 1978; 30:47-50.
33. Jain RC. Onion and garlic in experimental cholesterol atherosclerosis in rabbits. I. Effect of serum lipids and development of atherosclerosis. *Artery* 1975; 1:115-125.
34. Jain RC, Vyas CR. Garlic in alloxan-induced diabetic rabbits. *Am J Clin Nutr* 1975; 28:684-685.
35. Arora RC, Arora S. Comparative effect of clofibrate, garlic and onion on alimentary hyperlipemia. *Atherosclerosis* 1981; 39(4):447-452.
36. Augusti KT, Mathew PT. Lipid-lowering effect of allicin (diallyl disulphide-oxide) on long-term feeding to normal rats. *Experientia* 1974; 30:468-470.
37. Bhushan S, Sharma SP, Singhi SP, et al. Effect of garlic on normal blood cholesterol level. *Indian J Physiol Pharmacol* 1979; 23(3):211-214.
38. Jain RC. Effect of alcoholic extraction on garlic in atherosclerosis. *Am J Clin Nutr* 1978; 31:1982-1983.
39. Jain RC, Konar DB. Effect of garlic in experimental cholesterol atherosclerosis. *Atherosclerosis* 1978; 29:125-129.
40. Arisa T, Oshiba S, Tamada T. Platelet aggregation inhibitor in garlic. *Lancet* 1981; 1(8212):150-151.
41. Bordia A. Effect of garlic on human platelet aggregation in vitro. *Atherosclerosis* 1978; 30:355-360.
42. Srivastava KC. Aqueous extracts of onion, garlic and ginger inhibit platelet aggregation and alter arachidonic acid metabolism. *Biomed Biochim Acta* 1984; 43(8-9):335-346.
43. Bordia AK, Verma SK, Khamia BL, et al. The effectiveness and active principle of garlic and onion on blood lipids and experimental atherosclerosis in rabbits and their comparison with clofibrate. *J Assoc Physicians India* 1977; 25:509-516.
44. Gaffen JD, Tavares IA, Bennett A. The effect of garlic extracts on contractions of rat gastric fundus and human platelet aggregation. *J Pharm Pharmacol* 1984; 36(4):273-274.
45. Jain RC. Effect of garlic on serum lipids, coagulability and fibrinolytic activity. *Am J Clin Nutr* 1977; 30:1380.
46. Nasda KK, Ganerwal SK, Nasda KC, Diwan AM. Effect of onion and garlic on blood coagulation and fibrinolysis in vitro. *Indian J Physiol Pharmacol* 1983; 27:141-145.
47. Bordia AK, Joshi HK. Garlic on fibrinolytic activity in cases of acute myocardial infarction. Part II. *J Assoc Physicians India* 1978; 26(5):323-326.
48. Bordia AK, Joshi HK, Sanadhya YK, Bhu N. Effect of essential oil of garlic on serum fibrinolytic activity in patients with coronary artery disease. *Atherosclerosis* 1977; 28:155-159.
49. Makehia AN, Vanderhoek JY, Bailey JM. Inhibition of platelet aggregation and thromboxane synthesis by onion and garlic, letter. *Lancet* 1979; 1:781.
50. Sainani GS, Desai DB, Gorhe NH, et al. Effect of garlic and onion on important lipid and coagulation parameters in alimentary hyperlipaemia. *J Assoc Physicians India* 1979; 27(1): 57-64.
51. Sainani GS, Desai DB, Gorhe NH, et al. Dietary garlic, onion and some coagulation parameters in the Jain community. *J Assoc Physicians India* 1979; 27:707.
52. Samson RR. Effects of dietary garlic and temporal drift on platelet aggregation. *Atherosclerosis* 1982; 44:119-120.
53. Sharma KK, Sharma SP, Arora RC. Some observations on the mechanism of fibrinolytic-enhancing effect of garlic during alimentary lipemia in man. *J Postgrad Med* 1978; (2):98-102.
54. Boullin DG. Garlic as platelet inhibitor. *Lancet* 1981; 1: 776-777.
55. Malik SA, Siddiqui S. Hypotensive effect of freeze-dried garlic sap in dogs. *J Pakistan Med Assoc* 1981; 31:12.
56. Ruffin J, Hunter SA. An evaluation of the side effects of garlic as an antihypertensive agent. *Cytobios* 1983; 37(146): 85-9.
57. Tansye MR, Appleton JA. Inhibition of fungal growth by garlic extract. *Mycopathologia* 1975; 67:409.
58. Tutakne MA, Satyanarayanan G, Bhardwaj JR, Sethi IC. Sporotrichosis treated with garlic juice: A case report. *Indian J Dermatol* 1983; 28(1):41-45.
59. Fliermans C. Inhibition of *Histoplasma capsulatum* by garlic. *Appl Mycopathol Mycol* 1973; 50:227.
60. Caporaso N, Smith SM, Eng RH. Antifungal activity in human urine and serum after ingestion of garlic. *Antimicrob Agents Chemother* 1983; 23(5):700-702.
61. Amer M, Taha M, Tosson Z. The effect of aqueous garlic extract on the growth of dermatophytes. *Int J Dermatol* 1980; 19:285.
62. Appleton JA, Tansey MR. Inhibition of growth of zoopathogenic fungi by garlic extract. *Mycopathologia* 1975; 67:882.
63. Lau BHS, Keeler WH, Adetumbi MA. Antifungal effect of garlic. *Ann Am Soc Microbiol* 1983; 387.
64. Mishra SB, Dixit SN. Fungicidal spectrum of the leaf extract of *Allium sativum*. *Indian Phytopathol* 1976; 29:448.
65. Moore GS, Atkins RD. The fungicidal and fungistatic effects of an aqueous garlic extract on medically important yeast-like fungi. *Mycopathologia* 1977; 69:341.
66. Sandhu DK, Warraich MK, Singh S. Sensitivity of yeasts isolated from cases of vaginitis to aqueous extracts of garlic. *Kykosen* 1980; 23(12):691-698.
67. Yamada Y, Azuma K. Evaluation of the in vitro antifungal activity of allicin. *Antimicrob Agents Chemother* 1977; 11:743.
68. Nagai K. Experimental studies on the preventive effect of garlic extract against infection with influenza virus. *Jpn J Infect Dis* 1973; 47:321.
69. Hamdy El, Ahmed TH, Amin FM, et al. The role of food additives in the control of some parasites contaminating vegetables. *J Egypt Soc Parasitol* 1983; 13(2):539-545.
70. Kandil O, Abdullah TH, Elkadi A. Garlic and the immune system in humans: Its affect on natural killer cells. *Fed Proc* 1987; 46(4):1222.
71. Buck C, Donner AP, Simpson H. Garlic oil and ischemic heart disease, letter. *Int J Epidemiol* 1982; 11(3):294-295.
72. Buck C, Simpson H, Willan A. Ischemic heart disease and garlic, letter. *Lancet* 1979; 2:104-105.

73. Lau BHS, Adetumbi MA, Sanchez A. Allium sativum (garlic) and atherosclerosis: A review. *Nutr Res* 1983; 3:119.
74. Makheja AN, Vanderhoek JY, Bailey JM. Effects of onion extract on platelet aggregation and thromboxane synthesis. *Prostaglandins* 1979; 2(6):413-424.
75. Makheja AN, Vanderhoek JY, Bailey JM, Bryant RW. Altered arachidonic acid metabolism in platelets inhibited by onion or garlic extracts. *Adv Prostaglandin Thromboxane Leukotriene Res* 1980; 6:309-312.
76. Saxena KK, Gupta B, Kulshrestha VK, et al. Garlic in stress-induced myocardial damage. *Indian Heart J* 1979; 31:188-198.
77. Sogani RK, Katoch K. Correlation of serum cholesterol levels and incidence of myocardial infarction with dietary only and garlic eating habits. *J Assoc Physicians India* 1981; 29(6):443-446.
78. Apitz Castro R, Cabrera S, Cruz MR, et al. Effects of garlic extract and of three pure components isolated from it on human platelet aggregation, archidonate metabolism, release reaction, and platelet ultrastructure. *Thromb Res* 1983; 32(2):155.
79. Rashid A, Khan AA. The mechanism of hypotensive effect of garlic extract. *J Pakistan Med Assoc* 1985; 35:357.
80. Aso H. Induction of interferon and activation of NK cells and macrophages in mice by oral administration of Ge-132, an organic germanium compound. *Microbiol Immunol* 1985; 29(1):65-74.
81. Mizushima Y. Restoration of impaired immunoresponse by germanium in mice. *Int Arch Allergy Appl Immunol* 1980; 63:338-339.
82. Suzuki F, Pollard RB. Prevention of suppressed gamma-interferon production in thermally injured mice by administration of novel organogermanium compound Ge-132. *J Interferon Res* 1984; 4:223-233.
83. Burks JW. Classic aspects of onion and garlic dermatitis in housewives. *Ann Allergy* 1954; 12:592.
84. Campolmi P, Lombardi P, Lotti T, Sertoli A. Immediate and delayed sensitization to garlic. *Contact Dermatitis* 1982; 8(5):352-353.
85. Vanketel WG, Dehaan P. Occupational eczema from garlic and onion. *Contact Dermatitis* 1978; 4:53-64.
86. Xing M, Wang ML, Xu HX, et al. Gastric cancer—The effect of garlic on nitrite and nitrate in gastric juice. *Acta Nutrimenta Sinica* 1982; 4:53.
87. Wagner B. Intervention in the Aging Process, editorial. *Hum Pathol* 1985; 16(7):653.
88. Hammer S, Dorfman A, Wilbur A. To conquer cancer. *Sci Dig* 1985; 93(8):31-42.
89. Belman S. Onion and garlic oils inhibit tumor promotion. *Carcinogenesis* 1983; 4(8):1063-1065.
90. Watson JW. Biology and biochemical story of T cells. *J Immunol* 1983; 131:293.
91. Bonavida B, Wright S. Role of natural killer cytotoxic factors in the mechanism of target cell killing by natural killer cells. *J Clin Immunol* 1986; 6(1):1-8.
92. Xiyu P. Comparison of the cytotoxic effect of fresh garlic, diallyl trisulfide, 5-fluorouracil (5-FU), mitomycin (MMC), and Cis-DDP on two lines of gastric cancer cells. *Chung Hua Chung Liu Tsa Chih* 1985; 7(2):103-105.
93. Aboul-Enein AM. Inhibition of tumor growth with possible immunity by Egyptian garlic extracts. *Die Nahrung* 1986; 30(2):161-169.
94. Fujiwara M, Nataka T. Induction of tumor immunity with tumor cells treated with extract of garlic. *Nature* 1967; 216:83-84.
95. Choy YM, Kwok TT, Fung KP, Lee CY. Effect of garlic, Chinese medicinal drugs and amino acids on growth of Erlich ascites tumor cells in mice. *Am J Chin Med* 1983; 11:69-73.
96. Wargovich MJ. Diallyl sulfide, a flavor component of garlic (*Allium sativum*) inhibits dimethylhydrazine-induced colon cancer. *Carcinogenesis* 1987; 8(3):487-489.
97. Divorkin BM, Rosenthal WS, Wormser GP, Weiss L. Selenium deficiency in AIDS. *J Parenter Enter Nutr* 1986; 10:405-407.
98. Weisberger AS, Pensky J. Tumor inhibition by a sulfhydryl-blocking agent related to an active principle of garlic. *Cancer Res* 1957; 18:1301-1308.
99. Wills ED. Enzyme inhibition by allicin, the active principle of garlic. *Biochem J* 1956; 63:514.
100. Rich GD. Garlic—An antibiotic? *Med J Aust* 1982; 1:60.
101. Cavallito CJ, Bailey JH. Allicin, the antibacterial principle of *Allium sativum*. I. Isolation, physical properties and antibacterial action. *J Am Chem Soc* 1944; 66:1950.
102. Esanu V. Research in the field of antiviral chemotherapy performed in the Stefan S. Nicolau Institute of Virology. *Virologie* 1984; 35(4):281-293.
103. Cavallito CH, Buck JS, Suter CM. Allicin, the antibacterial principle of *Allium sativum*. II. Determination of chemical structure. *J Am Chem Soc* 1944; 66:1952.
104. Elnima EI, Ahmed SA, Mekkawi AG, Mossa JS. The antimicrobial activity of garlic and onion extracts. *Pharmazie* 1983; 38(11):747-748.
105. Esanu V. Recent advances in the chemotherapy of herpes virus infections. *Virologie* 1981; 32(1):57-77.
106. Huddleston IF, Dufrein J, Barrons KC, Giefel M. Antibacterial substances in plants. *J Am Vet Med Asso* 1944; 105:394.
107. Sharma VC, Sethi MS, Kumar A, Rarotra JR. Antibacterial property of *Allium sativum*: In vivo and in vitro studies. *Indian J Exp Biol* 1977; 15:446.
108. Yoshida S, Kasuga S, Hayashi N, et al. Antifungal activity of ajoene derived from garlic. *Appl Environ Microbiol* 1987; 53(3):615-617.
109. Adetumbi M, Javor GT, Lau BHS. *Allium sativum* (garlic) inhibits lipid synthesis by *Candida albicans*. *Antimicrob Agents Chemother* 1986; 30(3):499-501.